

## ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

9535 E. DOUBLETREE RANCH ROAD, SUITE 100, SCOTTSDALE, AZ 85258 PHONE (602) 364-1 PET (1738) FAX (602) 364-1039 VETBOARD.AZ.GOV

## COMPLAINT INVESTIGATION FORM

If there is an issue with more than one veterinarian please file a separate Complaint Investigation Form for each veterinarian

#### PLEASE PRINT OR TYPE

	FOR OFFICE USE ONLY				
	Date Received: NoV 13, 2017 Case Number: 16-34				
Α.	THIS COMPLAINT IS FILED AGAINST THE FOLLOWING:  Name of Veterinarian/CVT: Ken Prejs				
	Premise Name: Glenn Animal Care Hospital				
	Premise Address: 5450 W Glenn Drive				
	City: Glendale State: AZ Zip Code: 85301				
	Telephone: 623-937-4004				
В.	INFORMATION REGARDING THE INDIVIDUAL FILING COMPLAINT*:  Name: John Hancock				
	Address:				
	City: State: Zip Code:				
	Home Telephone: Cell Telephone:				

\*STATE LAW REQUIRES WE HAVE TO DISCLOSE YOUR NAME UNLESS WE CAN SHOW THAT DISCLOSURE WILL RESULT IN SUBSTANTIAL HARM TO YOU, SOMEONE ELSE OR THE PUBLIC PER A.R.S. § 41-1010. IF YOU HAVE REASON TO BELIEVE THAT SUBSTANTIAL HARM WILL RESULT IN DISCLOSURE OF YOUR NAME PLEASE PROVIDE COPIES OF RESTRAINING ORDERS OR OTHER DOCUMENTATION.

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BY:

D.

E.

C.	PATIENT INFORMATION (1):  Name: Precious  Breed/Species: Pitbull			
	•	Sex: F	Color: Black	
	PATIENT INFORMA	ATION (2).		
			4	
	Age:	Sex:	Color:	
<b>E</b> . 1	•	he name, address and perfections and perfections are the second of the s	ohone number of each witness that has	
	Attesta	tion of Person Rea	uesting Investigation	
and	igning this form accurate to th	, I declare that the in e best of my knowled cal records or inforn	nformation contained herein is true ge. Further, I authorize the release of nation necessary to complete the	

## F. ALLEGATIONS and/or CONCERNS:

Please provide all information that you feel is relevant to the complaint. This portion must be either typewritten or clearly printed in ink.

I went in to have my life long pet put down due to age and paln suffering. I raised her since she was 6 weeks old. Precipus went every where with me. She was socialized. Precipus never bit anyone in her life, Which is why I was shocked when Ken Preis asked to muzzle my dog on her death bed, I had given her all the shots all her life. She never reacted like this, but these needles were made for horses not dogs.

I recently had the experience of putting my friends Great Dane down. I know the procedure and how it should go, when done right. The process took about I hour. The dogs comfort a major concern. They used butterfly needles on the Great Dane, A dog clearly larger than my small pit bull.

Once at Glenn Animal Care Hospital, I went in to a very small room. There was one blanket on the table and the blinds were posed.

The doctor on hand Ken Prejs AZ License # 1712 came in the room. Ken Prejs attempted to give precious the sedation shot with a very large long needle, she turned and looked at him, she did not snarl or growl. Ken Prejs requested that I muzzle my dog. After I muzzled her, Ken Prejs gave her the full shot of the sedative in the neck with a thick long needle while she was still on the floor of the room, (not on the table), then Ken Prejs left the room for 5 minutes. (This is the only time I had alone with my dog Precious).

This was bad, but the rest is a nightmare. The sedative did not affect Precious, she was still standing after 5 minutes.

Ken Fitejs came into the room with the clippers and the euthanasia shot with the intent to euthanize her at this time. Ken Fitejs asked me to put her on the table.

Ken filejs opened the blind and began to shave Preclous' back right leg. Preclous was reacting to sound of the shaver and to line shaving of her leg. The veterinary technician placed her body weight on Preclous' ribs to hold her down because Preclous was fighting so hard. I fried to console her but she was not properly sedated.

I requested that Ken Prejs give her more sedative. Ken Prejs said "I will if you want me to." Ken Prejs gave Precious the same amount of sedative as before with the same size excessively large and long needle, again Precious reacted the same to the excessively large needle, then Ken Prejs left the room for 2-3 minutes before returning.

The vert tech stayed in the room with me and fought hard to hold my dog down to the table with her body weight on my dogs to cage for the entire 2-3 minutes. Precious is not sedated. Precious is still fighting. They wont leave her alone with me while the sedative kicks in, instead they are trying to hold her to the table??

Ken Flejs came back in and attempted to give Precious the euthanasia shot, again Precious reacted to the still too large reedle, then Ken Prejs switched to a smaller needled and finally put Precious down as his vet tech continued to struggle to hold her down to the table until Precious passed. She was never fully sedated, she never went to sleep. I watched in horror.

Precides was put down in a cruel way in front of me. It was very evident the moment that her heart stopped because she guit fighting the vet tech.

My Precious dog had to leave, fighting a vet tech with a muzzle on to the end of her time. There was no time for us to be together as she left.

Attached is the picture taken after she passed. At the beginning of this process the blanket covered the whole table. As you can see her head is on the cold table. She fought to the end.

I arrived at 12 noon. We went to the room at about 12:15pm and at 12::30 she passed. Heft at 12:34pm. Precides suffered terribly. Why is Ken Prejs allowed treat animals and humans like this? Please stop him.

Rev 8.14.17

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Kenneth Prejs Narrative:

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BY:

On November 11, 2017 John Hancock presented Precious a 10 year old, 55 pound, intact female Pitbuil for euthanasia. The appointment was originally scheduled for November 8, 2107, but Shirleen Hancock, the owner's mother cancelled saying John wanted more time with Precious. Shirleen also scheduled the original appointment for euthanasia saying that Precious had severely attacked her dog. John Hancock arrived alone and signed a form requesting euthanasia. His appointment was for 12:30pm and he arrived at noon. We did not want him to have to wait too long so he was given an exam room as soon as his paperwork was complete.

As I approached the exam room I could see that Precious was alert, healthy in appearance and standing in the exam room doorway. She was not on a leash. There was no history of rabies vaccination. John Hancock was occupied with his cell phone and seated in an exam room chair. I requested that he place a leash on Precious. He did not respond to my request and did not talk to me. I requested again that he place a leash on Precious. Again he did not respond or answer. At that point I asked him to at least hold her collar which he did. I placed a hospital slip leash on "Precious" and handed the end of the lead to John.

Normally I would question an owner before euthanizing a healthy looking animal, but the reason that we were given was aggression. So euthanasia seemed reasonable to me. I advised John that first we would give Precious a sedative to help relax her. When I came back to the room with the sedative the hospital leash was not on Precious. I requested John to restrain her with both hands on either side of her collar. As I went to give her the sedative Precious turned her head to the left and made eye contact with me. I then had an experienced staff member Lariena Southworth help with restraint and advised that we would use a soft muzzle whenever we were giving her an injection.

I injected 10mg acepromazine subcutaneously using a 3cc syringe with a 5/8" 25g needle. We removed the muzzle while she was relaxing. After about 10 minutes I checked on Precious. She seemed relaxed and I asked the owner to lift her onto the table which was padded with a soft blanket.

For euthanasia I have the animal placed in lateral recumbency and use the lateral saphenous vein to deliver the pentobarbital. This allows owners to be able to touch and talk to their pet as I give the injection. As we extended her right hind leg Precious withdrew her leg and would not tolerate clipping. It was apparent that she would require more sedation. I advised the John that we could give more sedative if we needed to. He agreed and I gave a second injection of 10mg acepromazine subcutaneously using a 3cc syringe with a 5/8" 25g needle.

I allowed another 10 minutes for Precious to further relax. Lariena remained in the room holding Precious on the blanketed table. I did not want John to have to keep lifting her onto the table and I could not be certain that he would properly restrain her.

With Precious in left lateral recumbency I finished clipping an area over the right lateral saphenous vein. Initially I had a 1" 21g needle to allow easier flow of the viscous pentobarbital. Even though I had changed to a new needle after drawing up the pentobarbital, it seemed as if the needle was just pushing against the wall of the vein. I quickly switched to a smaller 1" 22g needle and injected 6cc pentobarbital (390mg/ml) intravenously. Precious calmly passed away.

Owners are allowed to stay with their deceased pet as long as they would like. Some stay an hour or more. John Hancock left within minutes. There was no one accompanying him.

I believe I behaved in a reasonable and prudent manner, showing compassion for the pet to be euthanized, while taking appropriate precautions for the safety of other clients, pets and staff. The reason we were given for euthanasia was severe aggression to John Hancock's mother's dog. John Hancock was casual about restraining Precious. There was no history of rabies vaccination. We gave as much sedative as Precious required at no additional charge. The needles were appropriate size. Whenever she reacted negatively to anything that we were doing, we stopped and tried to make her more comfortable. John Hancock entered our office at noon and left at 12:45pm, a reasonable amount of time for a euthanasia.

Kenneth H. Prejs MS, DVM

November 22, 2017

# Douglas A. Ducey Governor



## VICTORIA WHITMORE - EXECUTIVE DIRECTOR -

## ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

1740 W. Adams Street, Ste. 4600, Phoenix, Arizona 85007 Phone (602) 364-1-PET (1738) • FAX (602) 364-1039 VETBOARD.AZ.GOV

## **INVESTIGATIVE COMMITTEE REPORT**

TO: Arizona State Veterinary Medical Examining Board

FROM: PM Investigative Committee: Adam Almaraz - Chair

Amrit Rai, D.V.M. Donald Noah, D.V.M.

Christine Butkiewicz, D.V.M.

Tamara Murphy

**STAFF PRESENT:** Tracy A. Riendeau, CVT – Investigations

Sunita Krishna – Assistant Attorney General Victoria Whitmore, Executive Director

**RE:** Case: 18-34

Complainant(s): John Hancock

Respondent(s): Kenneth Preis, DVM (License: 1712)

## SUMMARY:

Complaint Received at Board Office: 11/13/17

Committee Discussion: 2/18/18

Board IIR: 3/21/18

## **APPLICABLE STATUTES AND RULES:**

Laws as Amended July 2014

(Salmon); Rules as Revised September

2013 (Yellow)

On November 11, 2017, "Precious," a 10-year-old female Pitbull was presented to Respondent to be euthanized. The dog was sedated twice due to not being relaxed enough for a calm euthanasia.

Once sedated, the dog was muzzled and the euthanasia solution was administered; the dog passed away.

Complainant contends Respondent was negligent in the care of the dog.

Complainant was noticed and appeared. Ms. Shereen Hancock appeared. Respondent was noticed and appeared.

The Committee reviewed medical records, testimony, and other documentation as described below:

- Complainant(s) narrative: John Hancock
- Respondent(s) narrative/medical record: Kenneth Prejs, DVM
- Witness(es) narrative: Glenn Animal Care Hospital Staff

#### PROPOSED 'FINDINGS of FACT':

- 1. On November 7, 2017, Complainant's mother called to reschedule an appointment she previously made to have her son's dog euthanized on November 8, 2017. The appointment was changed to November 11, 2017. Complainant's mother had reported that Complainant's dog had attacked her dog.
- 2. On November 11, 2017, the dog was presented to Respondent for euthanasia. Respondent noted that the dog appeared healthy and did not ask why the dog was being euthanized since it was reported that the dog was aggressive towards other dogs. He advised Complainant that he would sedate the dog and requested Complainant to hold the dog's head as he administered 10mg of acepromazine. As Respondent went to give the injection, the dog turned and made eye contact with Respondent therefore Respondent had an experienced staff member restrain the dog. Complainant was advised that they would use a soft muzzle when they were giving injections. The acepromazine was administered SQ using a 5/8" 25g needle and the muzzle was removed.
- 3. Approximately 10 minutes later the dog appeared to be relaxed and Complainant was asked to place the dog on the exam table on the blanket available. As the right hind leg was extended, the dog withdrew her leg and would not tolerate clipping the hair from the leg. Complainant requested Respondent administer more sedative; Respondent agreed and another injection of 10mg acepromazine was administered using the same needle size as before.
- 4. According to Complainant, the dog was reacting to the clipper shaving her leg by struggling. Technical staff was placing all their weight on the dog to hold her on the table therefore Complainant requested additional sedation.
- 5. Respondent had technical staff stay with the dog holding her on the table while the additional sedation went into effect. He did not want Complainant to keep lifting the dog on the table and he could not be certain Complainant would properly restrain the dog.
- 6. After several minutes, Respondent was able to finish clipping the hair from the dog's leg over the saphenous vein. Respondent stated that he initially had a 1" 21g needle on the syringe containing the euthanasia solution to allow easier flow of the viscous solution however it seemed as the needle was pushing against the wall of the vein. He then changed the needle to a 1" 22g needle and administered 6mLs of pentobarbital IV; the dog passed away.
- 7, Complainant expressed concerns that the dog was held down on the table while the sedative took effect, Respondent used large needles to administer the injections, and the dog was not ever fully sedated causing her to be put to sleep fighting staff with a muzzle on.

#### COMMITTEE DISCUSSION:

The Committee discussed that this was an emotional situation. The dog had shown some aggression in the past therefore precautions were taken by muzzling the dog. Additionally, there was not a rabies vaccine history.

The Committee discussed that the size of the needles used were routine and were appropriate. Some euthanasias do not go as smoothly as expected.

## COMMITTEE'S PROPOSED CONCLUSIONS of LAW:

The Committee concluded no violations of the Veterinary Practice Act occurred.

## COMMITTEE'S RECOMMENDED DISPOSITION:

Motion: It was moved and seconded the Board:

Dismiss this issue with no violation.

**Vote:** The motion was approved with a vote of 5 to 0.

The information contained in this report was obtained from the case file, which includes the complaint, the respondent's response, any consulting veterinarian or witness input, and any other sources used to gather information for the investigation.

Tracy A. Riendeau, CVT Investigative Division